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FEC FORM 1	STATEMENT OF ORGANIZATION					Office Use Only				
NAME OF COMMITTEE (in	n full)	(Check if nan		cample:If typing, er the lines.	type	12FE	4M5			
		REAL ESTA	TE FI	NANCE	COU	NCIL	- PAC)	1 1	1
ADDRESS (number a (Check if ac is changed)	ddress	30 BROAD STREET 28TH FLOOR NEW YORK CITY				NY	100	004		
			CITY			STATE		ZIP	CODE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only mflood@crefc.org	one e-mail a	address)						
COMMITTEE'S WEB	PAGE ADD	RESS (URL)								
(Check if is change										
2. DATE 10	M / D 11	2011								
3. FEC IDENTIFIC	CATION NU	MBER (C00411	173						
4. IS THIS STATE!	MENT X	NEW (N)	DR	AMENDE	ED (A)					
I certify that I have a		s Statement and to the	e best of my	/ knowledge and	d belief it i	is true, d	correct and	d complet	e.	
Signature of Treasure	<i>Mike Flo</i> er	ood		[Electronically	Filed]	Date	10	11	/ Y	2011
NOTE: Submission of		ous, or incomplete inform						penalties	of 2 U.S	s.C. §437g.

	Office			For further information contact:	FEC FORM 1
1	Use			Federal Election Commission	
	Only			Toll Free 800-424-9530	(Revised 02/2009)